

2011 Medicare Prescription Drug Plans In Virginia

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Centers for Medicare & Medicaid Services
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Medicare PRESCRIPTION DRUG PLANS in Virginia



This chart provides basic information about what your costs will be for each plan. Contact the plan for specific details. Visit www.medicare.gov, or call 1-800-MEDICARE (1-800-633-4227) to compare plans or look for a plan that isn't listed. TTY users should call 1-877-486-2048. See pages 48-50 to learn how to get personalized help with your choices and what to consider when choosing a plan.

| Plan Name | Monthly Premium* | Annual Deductible | Amount You Pay for Each Prescription (1-month supply)* | Is There Additional Coverage During the Gap? |
|---|------------------|---------------------|--|--|
| Anthem Blue Cross and Blue Shield (\$5596) | | | | |
| Member Satisfaction Rating: ★ ★ ★ ★ ★ | | | | www.anthem.com |
| Blue MedicareRx Plus (PDP) (006) Phone: 800-261-8667 | \$58.20 | \$0 for all drugs | \$4 - \$85 Copay and/or 33% Coinsurance | Some Generics - Call plan |
| Blue MedicareRx Premier (PDP) (007) Phone: 800-261-8667 | \$104.40 | \$0 for all drugs | \$6 - \$85 Copay and/or 33% Coinsurance | Many Generics, Some Brands - Call plan |
| Blue MedicareRx Standard (PDP) (005) Phone: 800-261-8667 | \$33.10 | \$310 for all drugs | \$4 - \$36 Copay and/or 25% Coinsurance | None |
| Bravo Health (\$5998) | | | | |
| Member Satisfaction Rating: ★ ★ ★ ★ ★ | | | | www.mybravohealth.com |
| BravoRx (PDP) (016) Phone: 800-723-9209 | \$34.50 | \$310 for all drugs | 25% Coinsurance | None |
| CIGNA Medicare Rx (\$5617) | | | | |
| Member Satisfaction Rating: ★ ★ ★ ★ ★ | | | | www.cignamedicarerx.com |
| CIGNA Medicare Rx Plan One (PDP) (216) Phone: 800-735-1459 | \$34.50 | \$310 for all drugs | \$3 - \$83 Copay and/or 25% Coinsurance | None |
| CIGNA Medicare Rx Plan Two (PDP) (177) Phone: 800-735-1459 | \$65.50 | \$0 for all drugs | \$0 - \$78 Copay and/or 33% Coinsurance | Few Generics - Call plan |

* If you qualify for Extra Help, your monthly premium and the amount you pay for each prescription may be less than the amounts listed in these columns. Contact the plan for specific formulary (list of covered drugs) and cost information. If you qualify for the full Extra Help and the premium amount is BLUE, your premium for that plan will be \$0.

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| Plan Name | Monthly Premium* | Annual Deductible | Amount You Pay for Each Prescription (1-month supply)* | Is There Additional Coverage During the Gap? |
|---|------------------|---------------------|--|--|
| EnvisionRx Plus (S7694) | | | | |
| Member Satisfaction Rating: ★★★★★ | | | | www.envisionrxplus.com |
| EnvisionRxPlus Gold (PDP) (041) Phone: 866-250-2005 | \$68.10 | \$150 for all drugs | \$4 - \$25 Copay and/or 25% Coinsurance | Many Generics - Call plan |
| EnvisionRxPlus Silver (PDP) (007) Phone: 866-250-2005 | \$35.20 | \$310 for all drugs | 25% Coinsurance | None |
| First Health Part D (S5670) | | | | |
| Member Satisfaction Rating: ★★★★★ | | | | www.FirstHealthPartD.com |
| First Health Part D Premier Plus (PDP) (042) Phone: 800-882-3822 | \$87.70 | \$0 for all drugs | \$0 - \$25 Copay and/or 30% - 56% Coinsurance | Some Generics - Call plan |
| First Health Part D (S5768) | | | | |
| Member Satisfaction Rating: ★★★★★ | | | | www.FirstHealthPartD.com |
| First Health Part D Premier (PDP) (010) Phone: 800-882-3822 | \$35.70 | \$150 for all drugs | \$8 Copay and/or 17% - 36% Coinsurance | None |
| Health Net (S5678) | | | | |
| Member Satisfaction Rating: ★★★★★ | | | | www.healthnet.com |
| Health Net Orange Option 1 (PDP) (020) Phone: 800-606-3604 | \$30.60 | \$310 for all drugs | \$4 - \$75 Copay and/or 25% Coinsurance | None |
| Health Net Value Orange Option 2 (PDP) (019) Phone: 800-606-3604 | \$69.90 | \$0 for all drugs | \$0 - \$64 Copay and/or 33% Coinsurance | None |
| HealthSpring Prescription Drug Plan (S5932) | | | | |
| Member Satisfaction Rating: ★★★★★ | | | | www.healthspring.com |
| HealthSpring Prescription Drug Plan -Reg 7 (PDP) (007) Phone: 800-331-6293 | \$31.10 | \$310 for all drugs | 25% Coinsurance | None |

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Medicare PRESCRIPTION DRUG PLANS in Virginia

| Plan Name | Monthly Premium* | Annual Deductible | Amount You Pay for Each Prescription (1-month supply)* | Is There Additional Coverage During the Gap? |
|-----------|------------------|-------------------|--|--|
|-----------|------------------|-------------------|--|--|

Humana Insurance Company (S5884)

Member Satisfaction Rating: ★ ★ ★ ★ ★

www.humana-medicare.com

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|---|----------|----------------------------|--|---------------------------------------|
| Humana Complete (PDP) (035) Phone: 800-706-0872 | \$107.30 | \$0 for all drugs | \$0 - \$77 Copay and/or 33% Coinsurance | Many Generics, Few Brands - Call plan |
| Humana Enhanced (PDP) (065) Phone: 800-706-0872 | \$42.60 | \$50 some drugs; call plan | \$0 - \$76 Copay and/or 31% Coinsurance | Call plan for details |
| Humana Walmart-Preferred Rx Plan (PDP) (132) Phone: 800-706-0872 | \$14.80 | \$310 for all drugs | \$0 - \$10 Copay and/or 20% - 50% Coinsurance | None |

Medco Medicare Prescription Plan (S5660)

Member Satisfaction Rating: ★ ★ ★ ★ ★

www.medcomedicare.com

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|--|---------|-----------------------------|--|---------------------------|
| Medco Medicare Prescription Plan - Choice (PDP) (177) Phone: 800-758-3605 | \$95.40 | \$250 some drugs; call plan | \$6 - \$95 Copay and/or 26% Coinsurance | Many Generics - Call plan |
| Medco Medicare Prescription Plan - Value (PDP) (109) Phone: 800-758-3605 | \$35.60 | \$310 for all drugs | 25% Coinsurance | None |

RxAmerica (S5644)

Member Satisfaction Rating: ★ ★ ★ ★ ★

www.meds4medicare.com

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|---|---------|---------------------|---|------|
| Advantage Star Plan by RxAmerica (PDP) (073) Phone: 800-429-6686 | \$34.30 | \$310 for all drugs | \$2.50 - \$95 Copay and/or 25% - 35% Coinsurance | None |
|---|---------|---------------------|---|------|

SilverScript Insurance Company (S5601)

Member Satisfaction Rating: ★ ★ ★ ★ ★

www.SilverScript.com

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|---|---------|---------------------|---|---------------------------|
| CVS Caremark Plus (PDP) (015) Phone: 866-552-6106 | \$71.60 | \$0 for all drugs | \$1 - \$90 Copay and/or 33% Coinsurance | Many Generics - Call plan |
| CVS Caremark Value (PDP) (014) Phone: 866-552-6106 | \$32.20 | \$310 for all drugs | \$2.50 - \$95 Copay and/or 25% Coinsurance | None |

Sterling Life Insurance Company (S4802)

Member Satisfaction Rating: ★ ★ ★ ★ ★

www.sterlinghealth.com

| | | | | |
|--|---------|-----------------------------|--|------|
| Sterling Rx (PDP) (004) Phone: 888-909-1713 | \$42.80 | \$100 some drugs; call plan | \$4 - \$36 Copay and/or 25% Coinsurance | None |
|--|---------|-----------------------------|--|------|

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| Plan Name | Monthly Premium* | Annual Deductible | Amount You Pay for Each Prescription (1-month supply)* | Is There Additional Coverage During the Gap? |
|---|------------------|----------------------------|--|--|
| United American Insurance Company (S5755) Member Satisfaction Rating: ★ ★ ★ ★ ★ www.uamedicarepartd.com | | | | |
| UA Medicare Part D Prescription Drug Cov (PDP) (010) Phone: 866-524-4169 | \$45.60 | \$70 some drugs; call plan | \$10 - \$95 Copay and/or 31% Coinsurance | None |
| UnitedHealthcare (S5820) Member Satisfaction Rating: ★ ★ ★ ★ ★ www.AARPMedicareRx.com | | | | |
| AARP MedicareRx Preferred (PDP) (006) Phone: 888-867-5564 | \$32.40 | \$0 for all drugs | \$7 - \$83 Copay and/or 33% Coinsurance | None |
| UnitedHealthcare (S5921) Member Satisfaction Rating: ★ ★ ★ ★ ★ www.AARPMedicareRx.com | | | | |
| AARP MedicareRx Enhanced (PDP) (103) Phone: 888-867-5564 | \$88.80 | \$0 for all drugs | \$4.50 - \$78 Copay and/or 33% Coinsurance | Some Generics - Call plan |
| Universal American (S5803) Member Satisfaction Rating: ★ ★ ★ ★ ★ www.CommunityCCrx.com | | | | |
| Community CCRx Basic (PDP) (076) Phone: 866-423-5040 | \$29.20 | \$310 for all drugs | \$2 Copay and/or 25% - 62% Coinsurance | None |
| Community CCRx Choice (PDP) (144) Phone: 866-423-5040 | \$82 | \$0 for all drugs | \$0 - \$65 Copay and/or 33% Coinsurance | None |
| WellCare (S5967) Member Satisfaction Rating: ★ ★ ★ ★ ★ www.wellcarepdp.com | | | | |
| WellCare Classic (PDP) (144) Phone: 888-293-5151 | \$33.50 | \$310 for all drugs | \$0 - \$85 Copay and/or 25% Coinsurance | None |
| WellCare Signature (PDP) (041) Phone: 888-293-5151 | \$58.70 | \$0 for all drugs | \$0 - \$71 Copay and/or 33% Coinsurance | None |

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